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PTO/SB/05 (08-00)

Approved for use through 10/31/2002. OMB 0651-0032

Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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UTILITY PATENT APPLICATION TRANSMITTAL (Only for new non-provisional applications under 37 C.F.R. § 1.53(b))	Attorney Docket No.	P-3668-US
	First Inventor or Application Identifier	LIFSHITZ, Zvi
	Title	IMPLEMENTATION OF MEDIA SENSOR AND SEGMENT DESCRIPTOR IN ISO/IEC 14496-5 (MPEG-4 REFERENCE SOFTWARE)
	Express Mail Label No.	

APPLICATION ELEMENTS <i>See MPEP Chapter 600 concerning patent application contents</i>	ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Washington, DC 20231
1. <input checked="" type="checkbox"/> * Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing)	7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.	8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)
3. <input checked="" type="checkbox"/> Specification [Total Pages 9] (preferred arrangement set forth below)	a. <input type="checkbox"/> Computer Readable Form (CRF)
- Descriptive title of the Invention	b. <input type="checkbox"/> Specification Sequence Listing on:
- Cross References to Related Applications	i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or
- Statement Regarding Fed sponsored R & D	ii. <input type="checkbox"/> paper
- Reference to sequence listing, a table, or a computer program listing appendix	c. <input type="checkbox"/> Statements verifying identity of above copies
- Background of the Invention	
- Brief Summary of the Invention	
- Brief Description of the Drawings (if filed)	
- Detailed Description	
- Claim(s)	
- Abstract of the Disclosure	
4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 2]	
5. Oath or Declaration [Total Pages 2]	
a. <input checked="" type="checkbox"/> Newly executed (original or copy)	
b. <input type="checkbox"/> Copy from a prior application (37 C.F.R. § 1.63(d)) (for continuation/divisional with Box 16 completed)	
i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting Inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).	
6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76	

ACCOMPANYING APPLICATION PARTS	
9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))	
10. <input type="checkbox"/> 37 C.F.R. §3.73(b) Statement (when there is an assignee)	<input type="checkbox"/> Power of Attorney
11. <input type="checkbox"/> English Translation Document (if applicable)	
12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449	<input type="checkbox"/> Copies of IDS Citations
13. <input type="checkbox"/> Preliminary Amendment	
14. <input type="checkbox"/> Return Receipt Postcard (MPEP 5303) (Should be specifically itemized)	
15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)	
16. <input checked="" type="checkbox"/> Other: Postcard	

17. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☐ Continuation-In-part (CIP) of prior application No.: _____ / _____
Prior application information: Examiner _____ Group/Art Unit _____

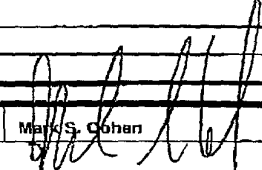
For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

18. CORRESPONDENCE ADDRESS

☐ Customer Number or Bar Code ☐ Correspondence address below

(Insert Customer No. or Attach barcode label here)

Name	Eitan, Pearl, Latzer & Cohen-Zedek				
Address	One Crystal Park, Suite 210, 2011 Crystal Drive				
City	Arlington	State	VA	Zip Code	22202-3709
Country	USA	Telephone	(703) 486-0600	Fax	(703) 486-0600

Name (Print/Type)	Mark S. Cohen	Registration No. (Attorney/Agent)	42,425
Signature		Date	18 October 2001

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$740.00)

Complete if Known

Application Number	
Filing Date	
First Named Inventor	LIFSHITZ, Zvi
Examiner Name	
Group / Art Unit	
Attorney Docket No.	P-3668-US

METHOD OF PAYMENT (check one)

1. ☒ The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit Account Number: 05-0649
Deposit Account Name: Eitan, Pearl, Latzer & Cohen-Zedek

- ☒ Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17
☐ Applicant claims small entity status. See 37 CFR 1.27

2. ☐ Payment Enclosed:

- ☐ Check ☐ Credit card ☐ Money Order ☐ Other

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Fee Code	Small Entity Fee Code	Fee (\$)	Fee Description	Fee Paid
101	201	740	Utility filing fee	740.00
106	206	330	Design filing fee	
107	207	510	Plant filing fee	
108	208	740	Reissue filing fee	
114	214	160	Provisional filing fee	

SUBTOTAL (1) (\$740.00)

2. EXTRA CLAIM FEES

Total Claims	Extra Claims	Fee from Below	Fee Paid
20+ =	X		
Independent Claims	-3 =	X	
Multiple Dependent	X		

Large Entity Fee Code	Small Entity Fee Code	Fee (\$)	Fee Description
103	203	18	Claims in excess of 20
102	202	84	Independent claims in excess of 3
104	204	280	Multiple dependent claim, if not paid
109	209	84	** Reissue independent claims over original patent
110	210	18	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$)

** or number previously paid, if greater. For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity Fee Code	Small Entity Fee Code	Fee (\$)	Fee Description	Fee Paid
105	205	130	85 Surcharge - late filing fee or oath	
127	227	50	25 Surcharge - late provisional filing fee or cover sheet	
138	139	130	130 Non-English specification	
147	147	2,520	2,520 For filing a request for ex parte reexamination	
112	112	920*	920* Requesting publication of SIR prior to Examiner action	
113	113	1,840*	1,840* Requesting publication of SIR after Examiner action	
115	115	110	55 Extension for reply within first month	
116	116	400	200 Extension for reply within second month	
117	117	920	480 Extension for reply within third month	
118	118	1,440	720 Extension for reply within fourth month	
128	128	1,960	980 Extension for reply within fifth month	
119	119	320	160 Notice of Appeal	
120	120	320	160 Filing a brief in support of an appeal	
121	121	280	140 Request for oral hearing	
138	138	1,510	1,510 Petition to institute a public use proceeding	
140	140	110	55 Petition to revive - unavoidable	
141	141	1,280	640 Petition to revive - unintentional	
142	142	1,280	640 Utility issue fee (or reissue)	
143	143	460	230 Design issue fee	
144	144	620	310 Plant issue fee	
122	122	130	130 Petitions to the Commissioner	
123	123	50	50 Petitions related to provisional applications	
128	128	180	180 Submission of Information Disclosure Stmt	
581	581	40	40 Recording each patent assignment per property (times number of properties)	
146	146	740	370 Filing a submission after final rejection (37 CFR 1.129(a))	
149	149	740	370 For each additional invention to be examined (37 CFR 1.129(b))	
179	179	740	370 Request for Continued Examination (RCE)	
169	169	900	900 Request for expedited examination of a design application	

Other fee (specify)

Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$)

SUBMITTED BY

Name (Print /Type)	Mark S. Cohen	Registration No. (Attorney/Agent)	42,425	Telephone	(703) 486-0600
Signature		Date	October 18, 2001		

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